

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000480913

**Entity Name:** KEYNOA'S INNOVATIVE STYLING STUDIO L.L.C.

**Current Principal Place of Business:**

4221 BAYMEADOWS ROAD  
SUITE 12  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

4221 BAYMEADOWS ROAD  
SUITE 12  
JACKSONVILLE, FL 32217 US

**FEI Number:** 87-3668313

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

POITIER, SHAKIRA K  
7400 POWERS AVENUE  
591  
JACKSONVILLE, FL 32217 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            MGR  
Name            POITIER, SHAKIRA K  
Address        7400 POWERS AVENUE APT 591  
City-State-Zip: JACKSONVILLE FL 32217

Title            AP  
Name            MOULTRIE, KIARA N  
Address        1471 W 22ND STREET  
City-State-Zip: JACKSONVILLE FL 32209

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHAKIRA KEYNOA POITIER

**OWNER**

**04/20/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date